



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM  
DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 9:01 am, Sep 24, 2013

PORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).  
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.  
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN <b>202005</b>	NAME OF AGENCY <b>INV# 25467 MSNP</b>	DATE OF INSPECTION <b>09/21/2013</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>DONIPHAN POLICE DEPARTMENT</b>		TIME OF INSPECTION <b>1131</b>

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) <b>09/21/13 1131</b>
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <b>50</b> °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <b>REPCO MARKETING</b> LOT # <b>13001</b> EXP. DATE <b>03/07/15</b>	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <b>34°</b> °C SIMULATOR SN <b>115394</b> EXP. DATE <b>02/20/14</b>	

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE  
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE  
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 = <b>.100</b>	TEST 2 = <b>.102</b>	TEST 3 = <b>.102</b>
----------------------	----------------------	----------------------

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS <b>0</b>	(0-.04) <b>0</b>	(.05-.09) <b>0</b>	(.10-.14) <b>1</b>	(.15-.19) <b>2</b>	OVER .19 <b>0</b>
-------------------	------------------	--------------------	--------------------	--------------------	-------------------

LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS  
(USE OTHER SIDE IF NECESSARY).

**OPERATES WITHIN STANDARDS**

INSPECTING OFFICER

SIGNATURE <b>Russell B. Arnold</b>	PRINT FULL NAME <b>RUSSELL B. ARNOLD</b>
TYPE # PERMIT NUMBER/EXPIRATION DATE <b>220273 09/15/14</b>	TELEPHONE NUMBER <b>573-840-9500</b>

RETURN COMPLETED REPORT TO THE:  
Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Blvd.  
Poplar Bluff, MO 63901

**CERTIFICATE OF ANALYSIS**

**MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.**

**LOT NUMBER: 13001**

**EXPIRATION DATE: March 7, 2015 at 11:59 p.m.**

RepCo Marketing, Inc. certifies the following:

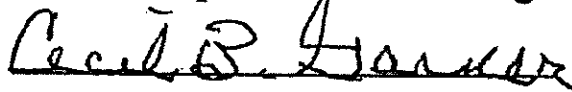
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1215 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is March 8, 2013  
The expiration date for this lot number is March 7, 2015 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 202065  
09/21/13

ARREST TIME: 11:00  
SUBJECT NAME:  
DOB: 12/31/31 SEX: M  
STATE/D.L.: MO/123456789  
ARRESTING OFFICER:  
H

OFFICER I.D.: 116  
TESTING OFFICER:  
H  
OFFICER I.D.: 116  
PERMIT NUMBER: 220273  
EXPIRATION DATE: 09/15/14  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000  
INTERNAL STANDARD VERIFIED  
RADIO INTERFERENCE

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 202065  
09/21/13

TESTING OFFICER:  
ARNOLD/R/B  
OFFICER I.D.: 116  
PERMIT NUMBER: 220273  
EXPIRATION DATE: 09/15/14  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000  
INTERNAL STANDARD VERIFIED  
EXTERNAL STANDARD .100  
BLANK TEST .000  
EXTERNAL STANDARD .102  
BLANK TEST .000  
EXTERNAL STANDARD .102  
BLANK TEST .000

N = 3  
SIM. = .1  
AVG. = .1013

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 202065  
09/21/13  
11:31

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM (04-07-2009): OKAY

HEATERS  
SAMPLE CHAMBER: 50C

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

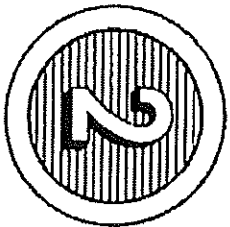
! " # \$ % & ' ( ) \* + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G  
H I J K L M N O P Q R S T U V W X Y Z [ \ ] ^ \_ ` a b c d e f g h i j k l m n o  
p q r s t u v w x y z { | } ~

Operator Signature RB 09/21/13

Operator Signature RB 09/21/13

Operator Signature RB 09/21/13

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



RUSSELL BARNOLD

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/15/2012

Director of State Public Health Laboratory

Number 220273

Expires 09/15/2014

Director, Department of Health

MO 580-0771 (7-83)

Lab. 4 (R7-83)